# Supplemental Application Data Sheet

### **Application Information**

Application number:: 10/711,704

Filing Date:: 09/30/04

Application Type:: Regular

Subject Matter:: Utility

Suggested Group Art Unit:: 3731

CD-ROM or CD-R?:: None

Sequence submission?:: None

Computer Readable Form (CRF)?:: No

Title:: METHODS AND DEVICES FOR

MINIMALLY INVASIVE SPINAL FIXATION

**ELEMENT PLACEMENT** 

Attorney Docket Number:: 101896-0283

Request for Early Publication?:: No

Request for Non-Publication?:: No

Total Drawing Sheets:: 23

Small Entity?:: No

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Sean

Middle Name:: P.

Family Name:: Selover

City of Residence:: Tiverton

State or Province of Residence:: RI

Country of Residence:: US

Street of mailing address:: 317B Highland Road

City of mailing address:: Tiverton

State or Province of mailing address:: RI

Postal or Zip Code of mailing address:: 02878

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Nancy

Middle Name:: M.

Family Name:: Sheehy

City of Residence:: South Boston

State or Province of Residence:: MA

Country of Residence:: US

Street of mailing address:: 797 East Broadway #1

City of mailing address:: South Boston

State or Province of mailing address:: MA

Postal or Zip Code of mailing address:: 02127

**Correspondence Information** 

Correspondence Customer Number:: 021125

**Representative Information** 

Representative Customer Number:: 021125

### **Domestic Priority Information**

| Application::    | Continuity Type::       | Parent Application:: | Parent Filing Date:: |
|------------------|-------------------------|----------------------|----------------------|
| This Application | Continuation-in-part of | 10/738,130           | 12/16/03             |

## **Foreign Priority Information**

# **Assignee Information**

Assignee name:: <u>DePuy Spine, Inc.</u>

Street of mailing address:: 325 Paramount Drive

City of mailing address:: Raynham

State or Province of mailing address:: MA

Postal or Zip Code of mailing address:: 02767